# L1/000052376

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#### **COVER LETTER**

Registration Section
Division of Corporations

SUBJECT:

# MJL & ASSOCIATES, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## TANYA RAMIREZ

Name of Person

# MJL & ASSOCIATES, LLC

Firm/Company

### 5438 N UNIVERSITY DR

Address

LAUDERHILL, FL 33351

City/State and Zip Code

HAIRPALACE1@LIVE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

# TANYA RAMIREZ

<sub>31</sub>,954,801**-**888;

Name of Person

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

■\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

#### **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### MJL & ASSOCIATES, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited L Florida document number <u>L11000052376</u>	iability Company were filed on	05/04/2011	and assigned	
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liability company	here:		
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Co	mpany," the designation "LLC	" or the abbreviation	
Enter new principal offices address, if applic	able:	De on	26	
(Principal office address MUST BE A STREE	T ADDRESS)	18 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13 FEB	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	<u></u>	SEE, FESTAR	3 11	
B. If amending the registered agent and/or the new registered of			name of the new	
Name of New Registered Agent:	TANYA RAMIREZ			
New Registered Office Address: 5438 N UNIVERSITY DR				
	Enter Florida street address			
	LAUDERHILL	. Florida 3335	, Florida <u>33351</u>	
	City		Zip Code	
New Registered Agent's Signature, if changing I	Registered Agent:			

If Changing Registered Agent, Signature of New Registered Agent

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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** Title **Address** Name MARTA J LOPEZ **CEO** 8310 SANDS POINT BLVD #L-108 Add TAMARAC FL 33321 Remove 5438 N UNIVERSITY DR 🗸 Add TANYA RAMIREZ CEO LAUDERHILL, FL 33351 Remove Remove Remove Add Remove

D. If amen	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) PLEASE MAKE ALL AMENDMENTS LISTED ABOVE			
Ē	EFFECTIVE ON FEBRUARY 01, 2013.			
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Dated JA	NUARY 29 , 2013			
	Marte for			
	Signature of a member or authorized representative of a member			
	MARTA J LOPEZ			
	Typed or printed name of signee			

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Filing Fee: \$25.00

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